

ISSUE SLIP STAPLE AREA (for additional cross references) \*

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		10/22/01
O.I.P.E. CLASSIFIER		2	11/9/01
FORMALITY REVIEW	TB	JC 1108	11-20-01
RESPONSE FORMALITY REVIEW	ST	1021	03/19/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/8/02
2	✓	✓	5/8/02
3	✓	✓	5/8/02
4	✓	✓	5/8/02
5	✓	✓	5/8/02
6	✓	✓	5/8/02
7	✓	✓	5/8/02
8	✓	✓	5/8/02
9	✓	✓	5/8/02
10	✓	✓	5/8/02
11	✓	✓	5/8/02
12	✓	✓	5/8/02
13	✓	✓	5/8/02
14	✓	✓	5/8/02
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20	✓	✓	5/8/02
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23	✓	✓	5/8/02
24	✓	✓	5/8/02
25	✓	✓	5/8/02
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28	✓	✓	5/8/02
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43	✓	✓	5/8/02
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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fup  
 11/10  
 781  
 3/19/02